

5-03

ID NO. _____ DATE _____
FEE DETERMINATION _____
O.I.P.E. CLASSIFIER _____
FORMALITY REVIEW _____
RESPONSE FORMALITY REVIEW _____

INDEX OF CLAIMS

- ✓ Rejected
 = Allowed
 (Through numeral) Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here
 (LEFT INSIDE)